UMC HEALTH SYSTEM

Service • Teamwork • Leadership

TO:
_____
School of Nursing

FROM: _____

TITLE: _____

DATE: _____

SUBJECT: **Nurse Tech Skill Validation**

Your student _____, has applied for a ***Nurse Tech*** position.

Prerequisites: Has completed one of the following courses:

TTU Students-**NURS 3512** Complex Concepts of Nursing Care
Covenant Students - 1103 (103 Adult Geriatric Nursing Care 1, 103 Pharm, 103 Patho)
And 1104 (104 Adult Geriatric Nursing Care II, 104 Phar, 104 Patho) (Module 4)
South Plains Colleg**e** - **RNSG2460 - Clinical Nursing Common Concepts**

Please indicate skills that he/she has been instructed in **and/or** satisfactorily demonstrated below.

	Yes	No
1. Discontinue Foley catheters		
2. Discontinue nasogastric tubes		
3. Discontinue peripheral IV's and INT's		
4. Site care on IV's and INT's		
5. Dressing changes on central lines		
6. Simple dry dressing changes		
7. Wet to dry dressing changes		
8. D/C wound staples and steristrip wounds/sutures		
9. Change ostomy appliances		
10. Apply and remove condom catheters		
11. Collection of blood venipuncture		
12. Perform glucose monitoring by glucometer		
13. Perform 12-lead EKG		
14. Facilitate use of insprirex		
15. Apply and remove TED hose		
16. Set up and take down traction frames		
17. Apply and remove the following equipment:		
a. Sequential compression devices		
b. Pulse oximeters		
c. Telemetry leads		
d. K-pads		
e. Cryo-cuffs		
f. Continuous passive motion machine (CPM's)		
g. Doppler		

Nurse Tech Skill Validation Form, NA Policy 113, Attachment 1, NR-108   Signature of Instructor   Rev (2) 7/2015